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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/901,512	07/09/2001	James E. Ross	212463	7508

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EXAMINER

NGUYEN, NGA B

ART UNIT	PAPER NUMBER
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3628

DATE MAILED: 02/28/2005

Please find below and/or attached an Office communication concerning this application or proceeding.

Office Action Summary

Application No.

09/901,512

Applicant(s)

ROSS ET AL.

Examiner

Nga B. Nguyen

Art Unit

3628

-- The MAILING DATE of this communication appears on the cover sheet with the correspondence address --
Period for Reply

A SHORTENED STATUTORY PERIOD FOR REPLY IS SET TO EXPIRE 3 MONTH(S) FROM THE MAILING DATE OF THIS COMMUNICATION.

- Extensions of time may be available under the provisions of 37 CFR 1.136(a). In no event, however, may a reply be timely filed after SIX (6) MONTHS from the mailing date of this communication.
- If the period for reply specified above is less than thirty (30) days, a reply within the statutory minimum of thirty (30) days will be considered timely.
- If NO period for reply is specified above, the maximum statutory period will apply and will expire SIX (6) MONTHS from the mailing date of this communication.
- Failure to reply within the set or extended period for reply will, by statute, cause the application to become ABANDONED (35 U.S.C. § 133). Any reply received by the Office later than three months after the mailing date of this communication, even if timely filed, may reduce any earned patent term adjustment. See 37 CFR 1.704(b).

Status

- 1) ☒ Responsive to communication(s) filed on 03 September 2004.
- 2a) ☒ This action is **FINAL**. 2b) ☐ This action is non-final.
- 3) ☐ Since this application is in condition for allowance except for formal matters, prosecution as to the merits is closed in accordance with the practice under *Ex parte Quayle*, 1935 C.D. 11, 453 O.G. 213.

Disposition of Claims

- 4) ☒ Claim(s) 7-14 and 37-46 is/are pending in the application.
- 4a) Of the above claim(s) _____ is/are withdrawn from consideration.
- 5) ☐ Claim(s) _____ is/are allowed.
- 6) ☒ Claim(s) 7-14 and 37-46 is/are rejected.
- 7) ☐ Claim(s) _____ is/are objected to.
- 8) ☐ Claim(s) _____ are subject to restriction and/or election requirement.

Application Papers

- 9) ☐ The specification is objected to by the Examiner.
- 10) ☐ The drawing(s) filed on _____ is/are: a) ☐ accepted or b) ☐ objected to by the Examiner.
Applicant may not request that any objection to the drawing(s) be held in abeyance. See 37 CFR 1.85(a).
Replacement drawing sheet(s) including the correction is required if the drawing(s) is objected to. See 37 CFR 1.121(d).
- 11) ☐ The oath or declaration is objected to by the Examiner. Note the attached Office Action or form PTO-152.

Priority under 35 U.S.C. § 119

- 12) ☐ Acknowledgment is made of a claim for foreign priority under 35 U.S.C. § 119(a)-(d) or (f).
- a) ☐ All b) ☐ Some * c) ☐ None of:
1. ☐ Certified copies of the priority documents have been received.
2. ☐ Certified copies of the priority documents have been received in Application No. _____.
3. ☐ Copies of the certified copies of the priority documents have been received in this National Stage application from the International Bureau (PCT Rule 17.2(a)).

* See the attached detailed Office action for a list of the certified copies not received.

Attachment(s)

- 1) ☒ Notice of References Cited (PTO-892)
- 2) ☐ Notice of Draftsperson's Patent Drawing Review (PTO-948)
- 3) ☐ Information Disclosure Statement(s) (PTO-1449 or PTO/SB/08)
Paper No(s)/Mail Date _____
- 4) ☐ Interview Summary (PTO-413)
Paper No(s)/Mail Date. _____
- 5) ☐ Notice of Informal Patent Application (PTO-152)
- 6) ☐ Other: _____

DETAILED ACTION

1. This Office Action is in response to the Amendment filed on September 3, 2004, which paper has been placed of record in the file.

2. Claims 37-46 have been added.

Claims 7-14 and 37-46 are pending in this application.

Response to Arguments/Amendment

3. Applicant's arguments with respect to claims 7-14 and 37-46 have been considered but are moot in view of new grounds of rejection.

4. Applicant's amendment necessitated the new grounds of rejection presented in this Office action. Accordingly, **THIS ACTION IS MADE FINAL**. See MPEP § 706.07(a). Applicant is reminded of the extension of time policy as set forth in 37 CFR 1.136(a).

A shortened statutory period for reply to this final action is set to expire THREE MONTHS from the mailing date of this action. In the event a first reply is filed within TWO MONTHS of the mailing date of this final action and the advisory action is not mailed until after the end of the THREE-MONTH shortened statutory period, then the shortened statutory period will expire on the date the advisory action is mailed, and any extension fee pursuant to 37 CFR 1.136(a) will be calculated from the mailing date of the advisory action. In no event, however, will the statutory period for reply expire later than SIX MONTHS from the date of this final action.

Claim Rejections - 35 USC § 102

5. The following is a quotation of the appropriate paragraphs of 35 U.S.C. 102 that form the basis for the rejections under this section made in this Office action:

A person shall be entitled to a patent unless –

(b) the invention was patented or described in a printed publication in this or a foreign country or in public use or on sale in this country, more than one year prior to the date of application for patent in the United States.

6. Claims 7, 13, 37-40, 45, and 46 are rejected under 35 U.S.C. 102(b) as being anticipated by Dr. Morris F. Collen, Hospital Computer Systems, John Willey & Sons, 1974 (hereinafter Collen).

Regarding to claim 7, Collen discloses a method of providing access to patient record documentation, patient tracking and order entry information in a system capable of rendering patient information in a variety of grease board views (pages 121-123, Physicians, nurses can access to patient record documentation, patient tracking and order entry information in a ***Nursing Station Subsystem***; page 122, paragraph 6, see “Selection of desired data”, the nursing station subsystem displays the data in “***multiple listings and indices***” that is equivalent to “a variety of grease board views”), comprising the steps of:

logging a user on to a peripheral terminal (page 125, paragraph 2, Dr. Smith inserts his identification card into the terminal identification card reader, the system logs the doctor), and

displaying, at the peripheral terminal, a name of the user and active patient list “grease board” (figure 6-1b and page 125, paragraph 2, the system logs Dr. Smith on and displays his name, the date, the time of his interaction with the terminal, and a

listing of patients and their bed locations, note that the patients is staying in the hospital are considered "active patients"), wherein the active patient list grease board is capable of displaying, from each one of a set of active patient records, a set of related information including: room location, patient's name, patient's physician, nursing orders, patient priority and elapsed time of stay (figures 6-1b, e.g. room location: 402B, patient's name: Brown, Bill, patient's physician: Dr. Smith; in figure 6-1b, the system also displays an admission date of each patient, e.g. patient Brown, Bill, the admission date is 19 OCT 72, thus the admission date of each patient showed the patient priority, also figure 6-1c displayed the date Dr. Smith accesses to patient Brown, Bill record for dictation (23 OCT 72), thus the admission date of patient Brown, Bill and the date Dr. Smith accesses to patient Brown, Bill record showed the elapsed time of stay of the patient Brown, Bill); status of assignment of nurse and physician, and status of X-rays, labs, tests, nurses' orders records, dictation and vital signs (see figures 6-1c through 6-1v),

wherein patient record information sets, from the active patient record, are presented on the peripheral terminal, during the displaying step, in accordance with a designated one of the variety of grease board views (page 125 and figures 6-1b through 6-1v, the patient record is displayed on the Nursing Station Subsystem in multiple listings and indices).

Regarding to claim 13, Collen further discloses wherein the logging a user on comprises inserting a security card in a receiver connected to the peripheral terminal, which logs on and identified the user and brings up the active patient list grease board

(page 125, paragraph 2, Dr. Smith inserts his identification card into the terminal identification card reader, the system logs the doctor on and displaying his name, the date, the time of his interaction with the terminal, and also displaying a listing of patients and their bed locations).

Regarding to claim 37, Collen discloses a system for presenting, at a peripheral displaying terminal, patient information in a variety of grease board views (pages 121-123, Physicians, nurses can access to patient information in a **Nursing Station Subsystem**; page 122, paragraph 6, see "Selection of desired data", the nursing station subsystem displays the data in "**multiple listings and indices**" that is equivalent to "a variety of grease board views"), the system comprising:

a security module including computer executable instructions for logging a user on to a peripheral terminal (page 125, paragraph 2, Dr. Smith inserts his identification card into the terminal identification card reader, the system logs the doctor), and

a tracking module including computer executable instruction for displaying, at the peripheral displaying terminal, an active patient list grease board, wherein the active patient list grease board is capable of displaying, from each one of a set of active patient records, a set of related information including the patient's name and variety of task-related information, wherein patient record information sets, from the active patient record, are presented on the peripheral terminal, during the displaying step, in accordance with a designated one variety of grease board views (figures 6-1b, e.g. room location: 402B, patient's name: Brown, Bill, patient's physician: Dr. Smith; in figure 6-1b, the system also displays an admission date of each patient, e.g. patient Brown,

Bill, the admission date is 19 OCT 72, thus the admission date of each patient showed the patient priority, also figure 6-1c displayed the date Dr. Smith accesses to patient Brown, Bill record for dictation (23 OCT 72), thus the admission date of patient Brown, Bill and the date Dr. Smith accesses to patient Brown, Bill record showed the elapsed time of stay of the patient Brown, Bill); status of assignment of nurse and physician, and status of X-rays, labs, tests, nurses' orders records, dictation and vital signs (see figures 6-1c through 6-1v, the patient record is displayed on the Nursing Station Subsystem in multiple listings and indices and page 117).

Regarding to claim 38, Collen further discloses wherein the security module and tracking module cooperatively limit access, by a logged on user, to patient information associated with ones of the set of active patient records (page 122, paragraph 2, see "User identification", the system is capable of controlling user access and level of access).

Regarding to claim 39, Collen further discloses wherein access to patient information is provided in the form of a set of functions that modify data associated with the active patient records (page 125, paragraph 3, the doctor can access patient information by selecting the patient on the list of patients and modify the data associated the active patient record such as Diagnosis, Signs and Symptoms, etc.).

Regarding to claim 40, Collen further discloses wherein access is based upon a user type associated with the logged on user (page 122, paragraph 2, see "User identification", e.g. an admission clerk may not enter a drug order, a physician may not

have access to admission files except for review, only a psychiatrist may retrieve psychiatric data, etc.).

Regarding to claim 45, Collen further discloses wherein the variety of grease board views comprises an outstanding orders view comprising at least a list of tasks that are pending for identified patients (figure 6-1v, a list of outstanding orders for the patient Brown, Bill, room 402B).

Regarding to claim 46, Collen further discloses wherein the variety of grease board views comprises a vital signs view comprising most recent vital signs taken for a list of identified patients (figure 6-1u, a list of most recent vital signs for the patient Brown, Bill, room 402B).

Claim Rejections - 35 USC § 103

7. The following is a quotation of 35 U.S.C. 103(a) which forms the basis for all obviousness rejections set forth in this Office action:

(a) A patent may not be obtained though the invention is not identically disclosed or described as set forth in section 102 of this title, if the differences between the subject matter sought to be patented and the prior art are such that the subject matter as a whole would have been obvious at the time the invention was made to a person having ordinary skill in the art to which said subject matter pertains. Patentability shall not be negated by the manner in which the invention was made.

8. Claims 8, 10-12, and 42-44 are rejected under 35 U.S.C. 103(a) as being unpatentable over Dr. Morris F. Collen, Hospital Computer Systems, John Wiley & Sons, 1974 (hereinafter Collen).

Regarding to claim 8, Collen does not disclose wherein an ordered status is shown in small letters and a completed status is shown by large letters for X-rays, labs,

test, nurses' order and dictation transcription. However, Collen does disclose the newer visual display of the Nursing Station Subsystem includes the more sophisticated software permit several approaches such as color-coding, blinking symbols or words, etc. in order to provide more attention to the user in regarding to specific information (page 123, paragraph 2). Moreover, displaying words in small letters and large letters is well known in the art and also is a desired choice in order to provide more attention to the user in regarding to specific information. Therefore, it would have been obvious to one with ordinary skill in the art at the time the invention was made to modify Collen's system to adopt the teaching of the obvious feature above for the purpose of providing more attention to the user in regarding to the status of X-rays, labs, test, nurses' order and dictation transcription.

Regarding to claims 10-12, Collen does not disclose displaying the active patient list grease board information in the form of a list of patients waiting to be seen by a physician in order of priority, a list of patient complaints, a list of patients whose reports have not been dictated by physician. However, it is well known in the art to construct a list of patients according to a particular goal such as patients waiting to be seen by a physician in order of priority, patient complaints, patients whose reports have not been dictated by physician. Therefore, it would have been obvious to one with ordinary skill in the art at the time the invention was made to modify Collen's system to adopt the teaching of the obvious features above for the purpose of assisting the doctors or other health care professional in efficiently, quickly and easily identify the patients in order to deliver care to the patients.

Claims 42-44 contain similar limitations found in claims 10-12 above, therefore, are rejected by the same rationale.

9. Claims 9 and 41 are rejected under 35 U.S.C. 103(a) as being unpatentable over Dr. Morris F. Collen, Hospital Computer Systems, John Willey & Sons, 1974 (hereinafter Collen), in view of Engleson et al (hereinafter Engleson), U.S. Patent No. 5,781,442.

Regarding to claims 9 and 41, Collen does not disclose wherein the variety of grease board views comprises a department layout view of patient information associated with the active patient record that includes a map of rooms and patient information associated with an occupant. However Engleson discloses wherein the variety of grease board views comprises a department layout view of patient information associated with the active patient record that includes a map of rooms and patient information associated with an occupant (figure 12 presents a computer screen containing an overview of a partial floor of a hospital in which various patients' rooms are shown with the names of the patient). Therefore, it would have been obvious to one with ordinary skill in the art at the time the invention was made to modify Collen's system to adopt the teaching of Engleson above for the purpose of assisting the doctors or other health care professional in efficiently, quickly and easily identify the patients in order to deliver care to the patients.

10. Claim 14 is rejected under 35 U.S.C. 103(a) as being unpatentable over Dr. Morris F. Collen, Hospital Computer Systems, John Willey & Sons, 1974 (hereinafter Collen), in view of Samar, U.S. Patent No. 5,778,072, and further in view of Ballantyne et al (hereinafter Ballantyne), U.S. Patent No. 5,867,821.

Regarding to claim 14, Collen does not disclose wherein pulling the security card from the receiver automatically exits the screen, establishes a security lockout on the peripheral terminal, and save the data which have been entered on the screen by transferring the data from the peripheral terminal to a file server communicatively connected to the peripheral terminal. However, Samar discloses wherein pulling the security card from the receiver automatically exits the screen, establishes a security lockout on the peripheral terminal (column 9, lines 5-15; when the user A removes the smart card 123 from the card reader 121, the operating system 135 terminates user A's session, logging user A out of the computer 101). Therefore, it would have been obvious to one with ordinary skill in the art at the time the invention was made to modify Collen's system to adopt the teaching of Samar above for the purpose of improving the security in accessing patient records at the peripheral terminal. Moreover, Ballantyne discloses saving the data which have been entered on the screen by transferring the data from the peripheral terminal to a file server communicatively connected to the peripheral terminal (column 12, lines 10-47; the PDA automatically transfers the modified health record to the PCS, or the nursing station transfers the modified health record to the Master Library). Therefore, it would have been obvious to one with ordinary skill in the art at the time the invention was made to modify Collen's system to adopt the teaching of Ballantyne above in order to ensure that the health records are maintained in a timely and efficiently manner.

Conclusion

11. Claims **7-14 and 37-46** are rejected.
12. The prior arts made of record and not relied upon is considered pertinent to applicant's disclosure:

Garcia (US 5,065,315) discloses system and method for scheduling and reporting patient related services including prioritizing services.

Shepard (US 5,704,371) discloses a medical history documentation system and method for recording information relating to at least one of a designated patient's current medical condition, a physical examination, a diagnosis and a treatment plan.

Barton et al (US 5,760,704) disclose patient tracking system for hospital emergency facility.

Clark et al (US 5,974,389) disclose medical record management system and process with improved workflow features.

13. Any inquiry concerning this communication or earlier communications from the examiner should be directed to examiner Nga B. Nguyen whose telephone number is (703) 306-2901. The examiner can normally be reached on Monday-Thursday from 9:00AM-6:00PM.

If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Hyung S. Sough can be reached on (703) 308-0505.

Any inquiry of a general nature or relating to the status of this application or proceeding should be directed to the Group receptionist whose telephone number is (703) 306-1113.

14. Any response to this action should be mailed to:

Commissioner of Patents and Trademarks
C/o Technology Center 3600
Washington, DC 20231

Or faxed to:

(703) 872-9326 (for formal communication intended for entry),

or

(703) 308-3691 (for informal or draft communication, please label
"PROPOSED" or "DRAFT").

Hand-delivered responses should be brought to Crystal Park 5, 2451 Crystal
Drive, Arlington, VA, Seventh Floor (Receptionist).

Nga B. Nguyen



February 7, 2005